

DEFENDANT QUESTIONNAIRE

Confidential Report

NAME: Mr. John Smith
 AGE: 29 GENDER: Male
 EDUCATION: High school graduate
 MARITAL STATUS: Married

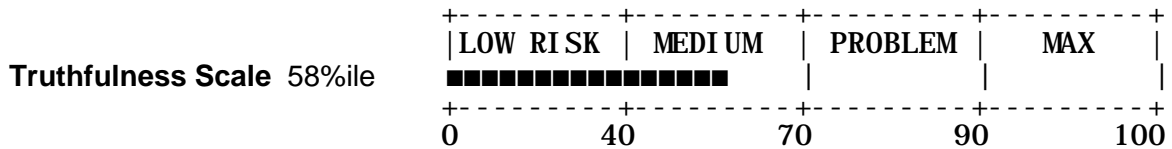
Last 4 Digits of SSN: 1234
 ETHNICITY/RACE: Caucasian
 DATE OF BIRTH: 11/23/1993
 DATE SCORED: 07/29/2022

Defendant Questionnaire (DQ) results are confidential and should be considered working hypotheses. No decision should be based solely upon DQ results.

INFORMATION PROVIDED BY CLIENT			
Conviction before age 16:	Yes	Assault/Violence related arrests:	0
Times on probation:	2	Alcohol-related arrests:	1
Probation revocations:	1	Drug-related arrests:	0
Total number of times arrested:	4	Months employed in last year:	11
		Total number of times incarcerated:	2

ATTAINED SCALE SCORES

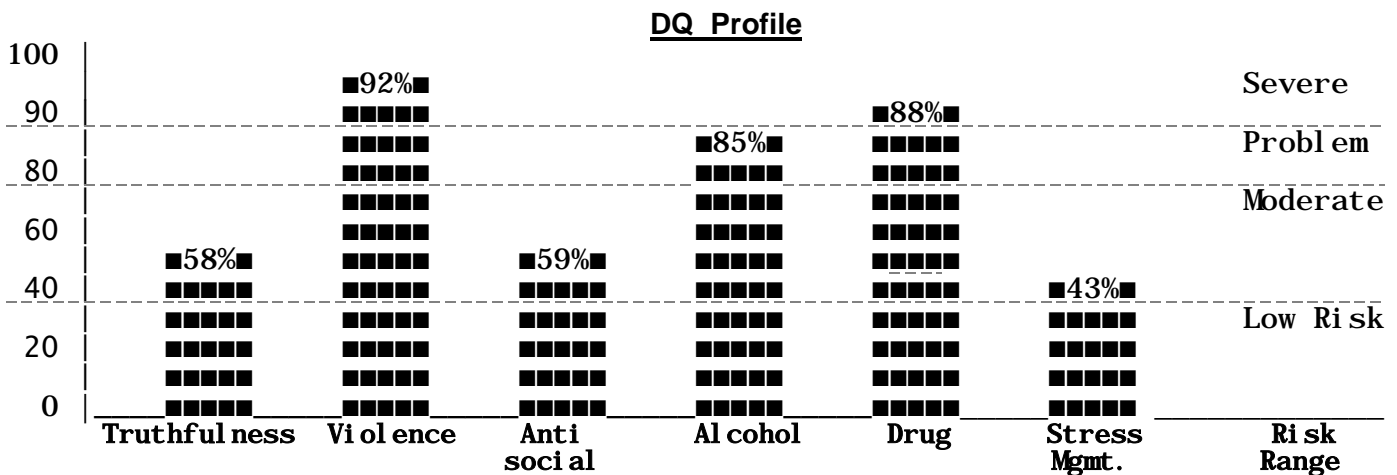
Each Defendant Questionnaire (DQ) scale (Truthfulness Scale, Alcohol Scale, Drug Scale, Substance Use Disorder Scale, Antisocial Scale, Violence Scale and the Stress Management Scale) is represented and discussed. Attained scale scores are presented, explained, and as warranted, attained score-related recommendations are made.



TRUTHFULNESS SCALE:

PERCENTILE SCORE: 58%

Mr. John Smith's Truthfulness Scale score is in the moderate (40 to 69th percentile) risk range. This is an accurate Defendant Questionnaire (DQ) profile and all DQ scale scores are accurate. Nevertheless, there is a tendency for Mr. Smith to be cautious when answering personal questions. This may be situation specific and related to why he is being evaluated. However, there is a fine line between caution and recalcitrance or evasiveness. That said, Mr. Smith's Truthfulness Scale score is within the acceptable or moderate range and all DQ scale scores are accurate.



VIOLENCE SCALE:**PERCENTILE SCORE: 92%**

Mr. John Smith's Violence Scale score is in the severe problem (90 to 100th percentile) range. Severe problem scorers often reflect an established history of violence and can be dangerous to themselves and others. When aroused, Mr. Smith's emotions interfere with his judgment. Recommendations: Among several effective therapies, Cognitive Behavioral Therapy is popular. Also review Mr. Smith's other Defendant Questionnaire (DQ) scale scores as they may interact thereby exacerbating his anger/violence. Violence or the consequences of violent acts warrant consideration of prompt intensive outpatient or inpatient (residential) treatment. Mr. Smith needs help.

ANTISOCIAL SCALE:**RISK: MODERATE**

Mr. John Smith's Antisocial Thinking Scale score is in the moderate risk range. Moderate risk scorers generally respect the rights of others and abide by societies rules and laws. For background, a DSM-5 Antisocial Personality Disorder diagnosis requires "a conduct disorder that must have appeared before the age of 15" as a necessary condition for the diagnosis. Mr. Smith's admits to (Q: #12) having an adolescent conduct disorder in which she disregarded the rights of others. A caveat, the DQ assesses "Antisocial Thinking" which is not an Antisocial Personality Disorder per se. Mr. Smith's Antisocial Thinking Scale score is in the moderate risk range.

ALCOHOL SCALE:**PERCENTILE SCORE: 85%**

Mr. John Smith's Alcohol Scale score is in the problem risk (70 to 89th percentile) range. Problem risk scorers invariably have a drinking problem that warrants intervention or treatment. Several effective outpatient services are available, e.g., Motivational Enhancement Therapy, 12 Step Facilitation Therapy, etc. Alcoholics Anonymous might augment, but not replace, treatment. Without intervention or treatment Mr. Smith's drinking problem will likely worsen. Alcohol Scale scores in the problem risk range do not occur by chance. Mr. Smith has a drinking problem that warrants intervention or treatment.

DRUG SCALE:**PERCENTILE SCORE: 88%**

Mr. John Smith's Drug Scale score is in the problem (70 to 89th percentile) range. Problem risk scorers have a drug (prescription or nonprescription) problem that warrants intervention and/or treatment. Recommendations: effective outpatient therapies are many and include Cognitive Behavioral Therapy, Motivational Counseling, The Matrix Model, etc. Ancillary services like Narcotics Anonymous (NA), Cocaine Anonymous (CA), Stress Management Classes, support groups, aftercare or relapse prevention, etc. are also available. Without treatment Mr. Smith's drug problem will likely worsen. Check other DQ scales for co-occurring problems and disorders.

STRESS MGMT. SCALE:**PERCENTILE SCORE: 43%**

Mr. John Smith's Stress Management Scale score is in the moderate risk (40 to 69th percentile) range. Mr. Smith's adequately manages the stress that he experiences in his life. For background, stress management skills, when lacking, are now taught in stress management classes. There are also many good "do it yourself" stress management books and articles in local bookstores and libraries. Without intervention or treatment early stage stress management problems will likely worsen. Bibliotherapy or stress management classes (if available) might be considered.

SUBSTANCE USE DISORDER:**RISK: Problem**

"Severity" of DSM-5 Substance Use Disorder is based upon the number of the eleven (11) substance use criteria that are admitted to or endorsed. Mr. Smith admits to **four or five** of the eleven criteria, which is classified as **problem** substance use. Note that neither tolerance nor withdrawal is necessary for a Substance Use Disorder diagnosis. Problem substance users are often referred to outpatient (individual or group) substance disorder counseling. Among several effective (inpatient/outpatient) psychotherapies is the popular Cognitive Behavior Therapy. Some outpatient groups emphasize alcoholism, others focus on drugs (prescription and nonprescription) and some are more generic (alcohol and drugs). Counseling is often augmented (not replaced by) AA, NA or CA meetings.

THREE SUBSTANCE-RELATED SCALES

The Defendant Questionnaire (DQ) integrates three substance related scales or measures: Alcohol Scale, Drug Scale and Substance Use Disorder Scale. The specifically focused Alcohol and Drug Scales enable staff to properly match problem severity with commensurate or comparable intervention or treatment intensity (or level of care). On the other hand, the DSM-5 Substance (alcohol/drug) Use Disorder Scale is ubiquitous in clinical substance use diagnosis, reimbursement and treatment. With regard to Mr. Smith's substance-related scale scores only one is elevated (70th percentile or higher) and that's the 1 scale, which scored in the problem (70 to 89th percentile) risk range. Problem risk scorers are usually in the early stage of a substance abuse problem, which contributes to their recidivism. Without treatment his substance-related problem will likely worsen.

SIGNIFICANT ITEMS. The following self-report answers help in understating Mr. Smith's situation.

ALCOHOL

- 13. Family concerned about drinking.
- 46. Needs help to overcome drinking.
- 56. Been told an alcoholic.
- Additional: #2, 7, 26, 42, 49, 71
104, 113, 114.

SUBSTANCE USE DISORDER

- 17. Drinks more than intended.
- 23. Desire to control substance use.
- 28. Persistent cravings for substance.
- Additional: #34, 47, 111.33, 72, 75, 78,

DRUG

- 4. Been told has a drug problem.
- 87. Uses and abuses drugs.
- 97. In treatment for drug problem.
- Additional: #9, 15, 32, 44, 76
99, 106.

VIOLENCE

- 5. Yell, throw and break things.
- 10. Tries to get even.
- 27. Violent temper tantrums.
- Additional: #22, 33, 40, 53.

ATTAINED DQ RISK RANGE	
• Truthfulness Scale – Moderate	• Violence Scale – Severe
• Alcohol Scale – Problem	• Antisocial Scale – Moderate
• Drug Scale - Problem	• Stress Mgmt. - Moderate
	• Substance Use Disorder - Problem

Recommendations: _____

Staff Signature

Date

DQ Answers

1- 50 FTTFTTTFFF FFFFFFFFFT FTTTTFTTF FTTFTFTFF FTTFFTFTF

51-100 FFFFFFFFFT TFFTFTFF FFFFTFTFT TTF311232 1213322131

101-137 3211313233 2123243141 4424424444 4143444